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## ORIGINAL ARTICLES

### RESPONSIBILITY FOR STATEMENTS AND CONCLUSIONS IN ORIGINAL ARTICLES

*The author of an article appearing in the JOURNAL is entirely responsible for all statements and conclusions. These may or may not be in harmony with the views of the editorial staff. Furthermore, authors are largely responsible for the language and method of presenting their subjects. All manuscripts will be carefully read, but editorial privileges will be exercised only to a very limited extent. It is believed that the manner of presentation of any subject by any author determines to no small degree the value of his conclusions. Therefore, both the author and the reader, in our opinion, are entitled to have the subject as presented by the author as little disturbed as possible by the editors. However, the right to reduce or reject any article is always reserved.*

## THE MEDICAL TREATMENT OF PEPTIC ULCER

By PHILIP KING BROWN, M. D., San Francisco  
(From the Medical Service of the Southern Pacific  
Hospital.)

The treatment of any disease depends on two main factors—a removal or amelioration of the conditions that cause it, and the symptoms and damage it produces. Since we know little about the causes of peptic ulcer, our chief aim has been to deal with the subjective symptoms of pain and the burning of the usually accompanying hyperacidity, with hemorrhage, with symptoms arising from mechanical obstruction either from contracting scar, adhesions or pylorospasm, and finally with symptoms from extension of inflammation to neighboring parts, often by perforation, commonly by close contact of these parts with the diseased area.

So far as etiology goes we have learned to recognize the likelihood of ulceration of the duodenum in uremic conditions, of ulcer associated with burns of the body, and as Ophuls has shown, with ulcer associated with arteriosclerotic changes. These are unusual occurrences, calling for no special treatment because of the probable etiology.

In serial Wassermann examinations in fifty-five gastric ulcers four gave a Wassermann + + + +, while in ninety-seven duodenal ulcers three gave a

Wassermann + + + +. This does not mean necessarily that these ulcers are syphilitic, nor does it mean that an ulcer associated with gastric crises of tabes is necessarily syphilitic, but we have had a few of these cases that were not amenable to ordinary treatment and whose symptoms, including hemorrhage, disappeared immediately on intensive anti-syphilitic treatment. This has led us to believe that some of these ulcers were syphilitic, and that in every case of ulcer a Wassermann should be made.

The relation of primary foci of infection in the mouth to ulcer has received much attention since Rosenau's work on the infectious origin of ulcer, and so reasonable does it seem, that we are growingly convinced that its commonness among railroad employes is influenced by mouth infection quite as much as by their notorious lack of proper dietetic regulation both as to quality and preparation of food, and regularity in eating, as well as haste. In the fifty-three cases that have passed through my wards in the past fifteen months, eleven have already been operated on for removal of the appendix, seven more of the eighteen that came to surgery had the appendix removed at time of operation on the gastric condition because of obvious clinical findings of trouble in the appendix. Two more had had operations on the gall-bladder and ten others were said by the roentgenologist to have cholecystitis. That these infections in the gastrointestinal tract have something to do with mouth infections seems highly probable, and in no single one of the series of fifty-three cases was the mouth in good condition except where all the teeth were on plates. Interesting also in this connection is the impression gained from discussions during the war with surgeons in the British army, who, as members of the Interallied Research Society run by the American Red Cross, assembled monthly in Paris to thresh out methods of handling the common problems of medicine and surgery. Hundreds of thousands of the lower class of British subjects received careful medical consideration for the first time, and the notorious frequency of advanced teeth and tonsil infections accompanied by ulcer of the stomach and duodenum, cholecystitis, and appendicitis was frequently commented on by British surgeons.

By way of prophylaxis, as well as an aid to healing, it is part of our routine treatment to care for

sented to him a reasonably complete statement of the accepted body of facts as they now exist in this branch of medicine, but that he will be enabled to grasp the meaning of the various movements that are pushing neuropsychiatric thought forward into new territories. In other words, the authors have not been content with presenting a certain amount of pabulum, so to speak, for the absorption of the student, but have endeavored to produce a book, which, if conscientiously used, will stimulate his thought." W. E. M.

## BOOKS RECEIVED

**Internal Medicine.** A work for the practicing physician on diagnosis and treatment with a complete desk index, in three volumes, illustrated with 427 text illustrations and fourteen in color. Medical diagnosis in two volumes, by James C. Wilson, M. D., emeritus professor of medicine and clinical medicine in the Jefferson Medical College, and emeritus physician to its hospital, assisted by Creighton H. Turner, M. D. Volume III, Treatment, by James C. Wilson and Samuel Bradbury, M. D., member of the faculty of the Cornell University Medical College; visiting physician, New York City Hospital, etc. Philadelphia and London: J. B. Lippincott Co.

**Applied Psychology for Nurses, An Introduction to.** By Donald A. Laird, assistant professor of psychology, University of Wyoming; lecturer in nursing psychology, Iverson Memorial Hospital School of Nursing. Illustrated. J. B. Lippincott Co., Philadelphia and London.

**Optotypes.** Consisting of test-letters and pictographs for measuring the acuteness of vision. By John Green, M. D., professor of ophthalmology in St. Louis Medical College (Washington University), 1886 to 1913, and A. E. Ewing, M. D., professor emeritus of ophthalmology in Washington University. With thirty-five engraved plates. St. Louis: C. V. Mosby Co., 1923.

**Tonsillectomy.** By means of the alveolar eminence of the mandible and a guillotine, with a review of the collateral issues. By Greenfield Sluder, M. D., clinical professor and director of the Department of Rhinology, Laryngology, and Otology, Washington University School of Medicine, St. Louis. Ninety illustrations. St. Louis: C. V. Mosby Co., 1923.

**Epidemiology and Public Health.** A text and reference book for physicians, medical students, and health workers, in three volumes. By Victor C. Vaughan, M. D., emeritus professor of hygiene in the University of Michigan, assisted by Henry F. Vaughan, Dr. P. H., commissioner of health of the city of Detroit, and George T. Palmer, Dr. P. H., epidemiologist for the department of health of the city of Detroit. Volume II, Nutritional Disorders, Alimentary Infections, Percutaneous Infections. St. Louis: C. V. Mosby Co., 1923.

**The Tonsils, Faucial, Lingual, and Pharyngeal,** with some account of the posterior and lateral pharyngeal nodules. By Harry A. Barnes, M. D., instructor in laryngology, Harvard Medical School. Illustrated. Second edition. St. Louis: C. V. Mosby Co., 1923.

**Cerebrospinal Fluid in Health and in Disease.** By Abraham Levison, M. D., associate in pediatrics, Northwestern University Medical School, with a foreword by Ludvig Hektoen, M. D. Sixty-nine

illustrations, including five color plates. Second edition, thoroughly revised. St. Louis: C. V. Mosby Co., 1923.

**Text-book of Therapeutics, including the Essentials of Pharmacology and Materia Medica.** By A. A. Stevens, M. D., professor of applied therapeutics, University of Pennsylvania, Philadelphia. Sixth edition, entirely reset. Octavo of 793 pages. Philadelphia and London: W. B. Saunders Co., 1923. Cloth, \$6.25 net.

**Medical State Board Questions and Answers.** By R. Max Goepf, M. D., professor of clinical medicine at the Philadelphia Polyclinic; assistant professor of clinical medicine, Jefferson Medical College. Fifth edition, thoroughly revised. Octavo volume of 731 pages. Philadelphia and London: W. B. Saunders Co., 1923. Cloth, \$6 net.

**First Aid X-ray Atlas of Fractures and Dislocations,** including illustrated description of the skeleton. By H. C. Orrin, surgeon, ministry of pensions Orthopedic Hospital; late civil surgeon the Third London General Hospital. New York: Paul B. Hoeber, 1923.

**First Aid X-ray Atlas of the Arteries.** By H. C. Orrin, surgeon, ministry of pensions Orthopedic Hospital; late civil surgeon to the Third London General Hospital. Paul B. Hoeber, New York, 1923.

## MEDICAL ECONOMICS

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**Commercial Exhibits at the A. M. A. Convention**—We feel sure that many of our advertisers have helped you by the splendid exhibits they displayed during the recent American Medical Association convention in San Francisco, and that the promise of the director of exhibits, as published in the A. M. A. Daily Bulletin, has been more than lived up to by many of our advertisers:

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"WILL C. BRAUN,  
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The Journal knows that you will remember with profit and pleasure the exhibits of the Abbott Laboratories, American Laundry Machinery Co., Arlington Chemical Co., W. A. Baum & Co., Bausch & Lomb Optical Co., Bischoff's Surgical House, George W. Brady & Co., G. W. Carnrick Co., Wilmot Castle Co., Cutter Laboratories, Hanovia Chemical Co., Hittenberger Co., Horlick's Malted Milk Co., Hynson, Westcott & Dunning, Laboratory Products Co., Maltbie Chemical Co., Mead Johnson & Co., Medical Protective Co., Mellin's Food Co., Pacific Was-

Sermann Laboratories, Radium Chemical Co., Radium Co. of Colorado, Reid Bros., Sanborn Co., Boston; R. L. Scherer & Co., G. H. Sherman, Taylor Instrument Co., Travers Surgical Co., Victor X-ray Corporation, Vulcan Electric Co., Walters Surgical Co., Wedekind Co., Wilson Laboratories.

There were also fine exhibits by many firms who have been among our advertising friends in the past and whose co-operation we hope to have again in the near future.

DEDICATED TO  
HARRY MITCHELL SHERMAN,  
FROM GRADUATE NURSES OF THE  
CHILDREN'S HOSPITAL  
WHO VALUE HIS GREAT BENEFACTIONS  
OF SERVICE  
TO THIS INSTITUTION,  
AND REVERE HIS NAME,  
FOR ITS INSPIRATIONAL IDEALS  
WHICH INFLUENCED THE GROWTH  
AND DEVELOPMENT  
OF THE  
SCHOOL OF NURSING,  
SAN FRANCISCO, 1922  
1885-1921.

This memorial tablet was dedicated and placed at the Children's Hospital on April 25, 1923. The invocation was by Dean Gresham and the presentation by Miss Goodhue. Dr. George J. McChesney accepted the tablet on behalf of the hospital, and the exercises were closed with a eulogy of Dr. Sherman's great service to humanity, by Dr. James B. Cutter, who said:

"He learned self-government, and not to be led aside by anything, and cheerfulness in all circumstances, as well as in illness, and a just admixture in the moral character of sweetness and dignity, and to do what was set before him without complaining, I observed that everybody believed that he thought as he spoke, and that in all that he did he never had any bad intention, and he never showed amazement and surprise, and was never in a hurry, and never put off doing a thing, nor was perplexed nor dejected, nor did he ever laugh to disguise his vexation, nor on the other hand was he ever passionate or suspicious.

"He was accustomed to do acts of beneficence, and was ready to forgive, and was free from all falsehood, and he presented the appearance of a man who could not be diverted from right, rather than a man who had been improved.

"This is the portrait of Harry M. Sherman, as gleaned from the life of Marcus Aurelius, to whom he has been likened, and whose memory we are assembled here today to honor, by the installation of this beautiful bronze tablet, which is to be placed in the 'Little Jim ward,' a spot closely and tenderly associated with Dr. Sherman's professional and personal life.

"We realize that while Dr. Sherman has

passed away, his deeds have not passed away, and his individuality remains among us.

"The encouragement for us, in contemplating his life, lies in the fact that he did not live for himself alone, rather that in his active and unselfish life he typified a noble race, reflecting in all he did, those fine qualities which we admire and try to emulate.

"Honorable with a type of integrity, peculiarly personal as an attribute, yet kind and generous in his judgment, with a severe self rule and discipline, yet tender in his regard for the rights and sensibilities of others, he was called by one who loved him much, 'Anax Andron,' King of Men, thus characterizing his attainments and his virtues.

"Harry M. Sherman rated so far above the rank and file of men with whom he lived and worked, that like other men of whom I think of similar attainments, he suffered during his life time from lack of their full appreciation of the height of his endeavors, and the purity of his purposes.

"To be called his friend conferred a blessing and distinction.

"Dr. Sherman, in concert with Dr. Charlotte Brown, gave the forward impulse to the Children's Hospital in its early years, and by his long and brilliant service made it as it will be for all time the center of orthopedic surgery on the Pacific Coast.

"So, in honoring him we use the words of one of his closest associates and dearest friends, 'Honor is an external adjunct, and pertains rather to the honorer than to the person honored.'

"We can not do anything to change Harry M. Sherman. He has gone beyond the boundaries of time and space, but by honoring him a change is wrought in us, and by a contemplation of what he was, both in excellencies of character and in the purposes and accomplishments of his life, we clarify our own souls and stimulate ourselves to follow his example."

### FIFTY YEARS OF NURSING

Nurses have recently celebrated the fiftieth anniversary of nursing as a profession in the United States. The first school of nursing in this country was founded at Bellevue Hospital, New York, in May, 1873. The development and growth of these schools is indicated:

| Year       | Number of<br>Hospital Schools | Number<br>of Students |
|------------|-------------------------------|-----------------------|
| 1880 ..... | 15                            | 323                   |
| 1890 ..... | 35                            | 3,985                 |
| 1900 ..... | 432                           | 11,164                |
| 1910 ..... | 1,121                         | 29,805                |
| 1920 ..... | 1,755                         | 55,000                |

During the fifty years, about 164,000 have graduated as nurses, and it is estimated that some 75,000 are practicing their profession. There are about 15,000 nurses engaged in public health work and some writers believe that this number should be increased to 50,000.

In looking over the mass of comment called forth by the mid-century celebration one feature stands out prominently and significantly: Some of the writers feel that the greatest accomplishment of the profession is throwing off the yoke of physician and hospital control and reaching the place where they are "grouped with medicine, law and theology as one of the learned professions." Other speakers consider that this place has not been reached and never should be. They believe that the great future of nursing requires that they hold to the position of technical assistants to physicians in preventing and treating disease.

All well-wishers of nurses realize that much of the future growth and usefulness of the profession depends upon the right solution of this their greatest problem.

Such a statement is food for very serious thought, and but emphasizes the necessity of the closest possible scrutiny of the budget demands of the individual agencies, and a rather autocratic allocation of funds to take care of the services of the various hospitals.

B. Loss of personal touch. This is expressed in the fear that by reason of the amalgamation of the philanthropic appeal of the community the particular friends of the hospital will lose sight of the intimate operation of that institution.

C. Improper distribution of funds. This is expressed in the statement that is made by one hospital that a larger amount of money in proportion to services rendered was furnished to another hospital than it obtained. This point again emphasizes the absolute necessity of conscientious, scientific management of the Fund and the general acceptance of the equity of that administration by the Community Chest as a whole.

D. The creating of a feeling of ownership by contributors. This thought is expressed by one superintendent, calling attention to the fact that residents of the community are making demands by reason of their contribution to the Community Chest. (If the author may be permitted the comment, this is an advantage rather than a disadvantage. Certainly it would seem highly desirable that our citizens think in possessive terms of their hospitals.)

E. Sacrifice of popular agencies. This thought is expressed by an individual who says that unquestionably individual agencies with a popular appeal can get more money individually than they could by participation in the Chest.

Commenting editorially upon the three articles of which Chapman's is the last, the editor of the Modern Hospital says:

"Whatever untenable attitude of individualism hospitals may have taken in the past, they must henceforth take their place with the other social welfare agencies of the community, and through co-operative planning and work assist in eradicating the abuses of miscellaneous and unrelated social work, in establishing high standards of service and kindred activities.

"Just how far hospitals are already participating in this community organization movement as it now exists in about 125 American cities we have no means of knowing, but some conception of the degree of this participation may be gained from the figures gathered by Mr. Chapman from the ten cities from which he sought information for the basis of his article. In three instances the hospitals do not participate in the financial federation of their community. In the remaining seven instances the approximate percentage of budget requirements of the hospitals provided for by the community chest runs from ten to twenty-seven per cent. In three instances only a limited number of hospitals participate."

**Sad Comment Upon Medical Licensure**—California licensed 405 graduates of low-grade medical colleges, the largest number licensed in any State during the last six years. The next largest numbers licensed were 177 in Illinois, 150 in Arkansas, 149 in Connecticut, 146 in Massachusetts, 141 in Missouri, and 120 in Colorado.—From editorial in Journal of the American Medical Association, April 28, 1923.

The Board of Medical Examiners will hold a regular meeting at Native Sons hall, 414 Mason street, San Francisco, July 9 to 12 inclusive, for the purpose of holding examinations, legal hearings, and other business that may properly come before the board.

C. B. PINKHAM,  
Secretary-Treasurer.

## TRANSFERRED

J. A. McKenney, from Fresno county to Alameda county; Charles R. Fancher, from Stanislaus county to Alameda county; Harry Auslen, from Contra Costa county to Alameda county; William F. Priestley, from San Joaquin county to Alameda county; C. E. Harrison, from San Bernardino county to Los Angeles county; James E. Harvey, from Yuba-Sutter county to Los Angeles county; Carl S. J. Tillmanns, from Imperial county to Los Angeles county.

## NEW MEMBERS

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Madera—Ray R. Dearborn.

El Centro—F. W. Peterson.

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Sacramento—Charles E. Thompson.

Berkeley—Gurdon Potter.

Oakland—Frank Ray Missner.

## DEATHS

Barnes, Henry E. W. Died at Santa Ana, May 30, 1923, age 74. Graduate of the State University of Iowa College of Medicine, Iowa City, 1873. Licensed in California in 1901. He was a member of Orange County Medical Society, the State Medical Society, and the American Medical Association.

Neff, Francis F. Died at Concord, June 17, 1923, age 61. He graduated from the Jefferson Medical College, Philadelphia, 1887. Licensed in California in 1889. Dr. Neff was a member of the Contra Costa County Medical Society, the State Medical Society, and the American Medical Association.

Orr, James Lawrence. Died at San Diego, May 7, 1923, age 44. Graduate of the Medical College of the State of South Carolina, Charleston, 1901. He was a member of the South Carolina Medical Association and the American Medical Association.

Rogers, Benjamin H. Died at San Diego, May 2, 1923, age 60. Graduate of the Jefferson Medical College, Philadelphia, 1888. Licensed in California in 1922. He was a member of the San Diego Medical Society, the State Medical Society, and the American Medical Association.